

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000035505

1. Entity Name

PREMIER INVESTMENTS, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT '07 AM 8:00

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03

2. Principal Place of Business
3200 S CONWAY ROAD

3. Mailing Address
3200 S CONWAY ROAD

City, Apt. #, etc.

City, Apt. #, etc.

City & State
ORLANDO FL

City & State
ORLANDO FL

Zip
32812

County
ORANGE

Zip
32812

County
ORANGE

DO NOT WRITE IN THIS SPACE
06/23/03 90056 008 *150.00
4. FE Number 593637275

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name KAMLESH VADHER

416 VILLAGE PLACE

City DAVENPORT

FL

Zip Code
33837

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE OF OFFICER OR DIRECTOR *K. Vadher*

(Check if registered agent or officer is required to be a resident of Florida)

9/24/2003

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

NAME KAMLESH VADHER 416 VILLAGE PLACE DAVENPORT FL 33837	PVP/T	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(g) Florida Statutes. I further certify that the information included in this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 Florida Statutes, and that my name appears on Block 10 or on the addendum with an address, with all other fee empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

K. Vadher
President

9/29/2003

407 9705731

CR/ECHE 7/2002

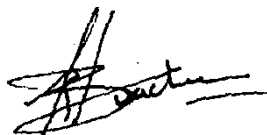
Mr. Kamlesh Vadher
Premier Investments, Inc.
5973 Bent Pine Dr
#2022
Orlando
FL 32822

2nd June 2003

Dear Sir / Madam,

Please find enclosed our cheque for \$150.00
in payment to re-instate the said corporation.
We have ~~not~~ not received the original forms.

Many thanks



Kamlesh Vadher

enc: